

# 2021 Benefit Costs

## Transit ATU 587: Part Time Partial Benefits



**King County**

Benefits, Payroll and  
Retirement Operations

Employees on the Part-time Partial Benefits plan contribute to medical, dental, and vision plan premiums. Costs for supplemental AD&D, supplemental Life, and supplemental Long-term Disability are paid by both Part-time Partial Benefits plan and Part-time Full Benefits plan employees.

Part Time Partial Benefit Employees (PTTO)		
Plan	2020 Monthly Rates	2021 Monthly Rates
<b>KingCare (Regence)</b>		
– Employee only	\$416.91	\$500.38
– Employee & Spouse	\$1,301.55	\$1,483.18
– Employee & Child(ren)	\$1,124.62	\$1,286.62
– Employee & Family	\$2,009.26	\$2,269.42
<b>KingCare Select (Regence)</b>		
– Employee only	\$360.28	\$442.13
– Employee & Spouse	\$1,188.29	\$1,366.68
– Employee & Child(ren)	\$1,022.69	\$1,181.77
– Employee & Family	\$1,850.70	\$2,106.32
<b>SmartCare (Kaiser)</b>		
– Employee only	\$116.93	\$120.61
– Employee & Spouse	\$701.59	\$723.64
– Employee & Child(ren)	\$584.66	\$603.03
– Employee & Family	\$1,169.32	\$1,206.06
<b>Delta Dental of Washington</b>		
– Employee only	\$34.66	\$32.42
– Employee & Spouse	\$103.98	\$97.26
– Employee & Child(ren)	\$90.12	\$84.29
– Employee & Family	\$159.44	\$149.13
<b>Vision Service Plan</b>		
– Employee only	\$5.96	\$5.79
– Employee & Spouse	\$17.88	\$17.37
– Employee & Child(ren)	\$15.50	\$15.05
– Employee & Family	\$27.42	\$26.63

Supplemental Accidental Death & Dismemberment (AD&D): Part Time Partial Benefits and Part Time Full Benefits				
Amount	Employee	Spouse/partner 50% of employee coverage	Spouse/partner 100% of employee coverage	All Children 10% of employee coverage
<b>\$50,000</b>	\$0.85	\$0.43	\$0.85	\$0.25
<b>\$100,000</b>	\$1.70	\$0.85	\$1.70	\$0.50
<b>\$150,000</b>	\$2.55	\$1.28	\$2.55	\$0.75

<b>\$200,000</b>	<b>\$3.40</b>	<b>\$1.70</b>	<b>\$3.40</b>	<b>\$1.00</b>
<b>\$250,000</b>	<b>\$4.25</b>	<b>\$2.13</b>	<b>\$4.25</b>	<b>\$1.25</b>
<b>\$300,000</b>	<b>\$5.10</b>	<b>\$2.55</b>	<b>\$5.10</b>	<b>\$1.50</b>
<b>\$350,000</b>	<b>\$5.95</b>	<b>\$2.98</b>	<b>\$5.95</b>	<b>\$1.75</b>
<b>\$400,000</b>	<b>\$6.80</b>	<b>\$3.40</b>	<b>\$6.80</b>	<b>\$2.00</b>
<b>\$450,000</b>	<b>\$7.65</b>	<b>\$3.83</b>	<b>\$7.65</b>	<b>\$2.25</b>
<b>\$500,000</b>	<b>\$8.50</b>	<b>\$4.25</b>	<b>\$8.50</b>	<b>\$2.50</b>

<b>Supplemental Life: Part Time Partial Benefits and Part Time Full Benefits</b>			
<b>Age</b>	<b>Employee Per \$25,000 of coverage</b>	<b>Spouse/Domestic Partner Per \$25,000 of coverage</b>	<b>All children \$10,000 of coverage</b>
<b>Under 25</b>	\$0.83	\$1.10	<b>\$ .901</b>
<b>25-29</b>	\$0.98	\$1.35	
<b>30-34</b>	\$1.35	\$1.78	
<b>35-39</b>	\$1.35	\$2.00	
<b>40-44</b>	\$1.70	\$2.23	
<b>45-49</b>	\$2.73	\$3.33	
<b>50-54</b>	\$4.70	\$5.10	
<b>55-59</b>	\$8.35	\$9.55	
<b>60-64</b>	\$11.13	\$14.68	
<b>65-69</b>	\$19.03	\$28.23	
<b>70+</b>	\$30.90	\$45.78	

**Supplemental Long-Term Disability (LTD) = \$6.81 per month (Part Time Partial Benefits and Part Time Full Benefits)**